FLORIDA DEPARTMENT OF S CAMPAIGN TREASURI	TATE DIVISION OF ELECTIONS ER'S REPORT SUMMARY
(1) Brenda Caudell Martin Name (2) 7618 Chumuckla Hwy Address (number and street) Milton, FL 32571	OFFICE USE ONLY 2003 17 86 4 12
City, State, Zip Code CHECK IF ADDRESS HAS CHANGED (4) Check appropriate box(es): Candidate (office sought): Santa Rosa Schemen Political Committee Committee of Continuous Existence Party Executive Committee Electioneering Communication	☐ CHECK IF PC HAS DISBANDED ☐ CHECK IF CCE HAS DISBANDED ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
_	IDENTIFIERS 8 / 1 / 2008 Report Type F2 1 Report Independent Expenditure Report
(6) CONTRIBUTIONS THIS REPORT Cash & Checks \$ 46.65 Loans \$ 46.65 Total Monetary \$ 46.65 In-Kind \$ 50.00	(7) EXPENDITURES THIS REPORT Monetary Expenditures \$ 875.00 Transfers to Office Account \$ Total Monetary \$ 875.00
(9) TOTAL Monetary Contributions To Date \$	(8) Other Distributions \$ (10) TOTAL Monetary Expenditures To Date \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
It is a first degree misdemeanor for any personal certify that I have examined this report and it is true, correct, and complete. (Type name) Brenda Martin Individual (only for electiones) ing commun.) X Martin Signature	

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	(2) I.D. Number
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(3) Cover Period	<u> </u>	throu	igh /	/	(4) Page	e (of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
7 , 31 ,08	Steve Douglas	I	self	ck	N		25.00
7 , 31 ρ8 2	Ann Grimes	I	self	cas	N		10.00
7 / 31 / 08	Brenda Martin	I	self	ck	N		11.65
8 , 01 ,08	Joy Brown	В	Realtor	INK	N		50.00
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1 1							\$96.65

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name _ Brenda Caudell-Martin (2) I.D. Number ___ (3) Cover Period $\frac{7}{19} / \frac{19}{108} / \frac{08}{100} / \frac{01}{100} / \frac{08}{100}$ (4) Page _____ of ____ (7) (9) (10) (11) (5) Date Full Name Purpose (Last, Suffix, First, Middle) (add office sought if (6) Expenditure Street Address & contribution to a Sequence Type City, State, Zip Code candidate) Number Amendment Amount Trents Prints mail out cards mon \$875.00 1010

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